

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) House Majority PAC	FEC IDENTIFICATION NUMBER ▼ C C00495028
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Ralston Lapp Media			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 14 / 2015		
Mailing Address 1054 31st St NW Ste 430			Amount 11089.62		
City Washington	State DC	Zip Code 20007-6042	Transaction ID : VN7GDA0DCR6		
Purpose of Expenditure Media Production Costs - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Lee M. Zeldin		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		District: 01 State: NY
Calendar Year-To-Date Per Election for Office Sought		96718.02	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/Type			
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11089.62
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	11089.62

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Alixandria Lapp

[Electronically Filed]

Date

MM / DD / YYYY
11 / 16 / 2015

Signature